Guide to This Report

Six pages of the report are devoted to each measure. This guide outlines what is covered on each page.

This text contains the **BRFSS** measure definition including question(s) and response(s).

This text describes why this measure is important.

the risk factors for the measure.

This text explains

This text explains how Utah is doing on this measure.

This text names the measure being addressed.

1. Fair or Poor Health

Measure Definition: "Would you say that in general your health is excellent, very good, good, fair or poor?" [Fair or poor health]

Why is fair or poor health important to public health?

The general health status question, also referred to as self-rated health, is the first of a set of four health-related quality of life questions that have been used on the BRFSS since 1993 and on the National Health and Nutrition Examination Survey (NHANES) since 2000. The Centers for Disease Control and Prevention (CDC) developed this set of standard questions in the early 1990s at the request of state and local health departments and others in order to track health-related quality of life (HRQOL) in states and communities

HRQOL complements mortality and morbidity as measures used for tracking changes and disparities in population health. Concerns about the aging of the population, the burden of chronic disease, environmental health threats, health behavior trends, and the health care system have lead to increased interest in monitoring overall population health. Population-based surveillance of HRQOL is used to monitor progress toward achieving the two overall national health goals for Healthy People 2010: (1) increase the quality and years of healthy life and (2) eliminate health disparities.1

The CDC HRQOL measures have demonstrated reliability for population health surveillance.² For this report, the self-rated health question was divided into two groups: fair or poor health and excellent, very good, or good health. For this analysis we looked at the percentage of adults reporting fair or poor health.

Risk factors for fair or poor health

According to a recent report using national BRFSS data from 1993-2002, self-rated health substantially differed among socioeconomic and demographic subgroups. A higher percentage of women reported fair or poor health compared with men. Older adults were more likely to report fair or poor health than younger adults. More Hispanic, American Indian/Alaska Native, and non-Hispanic Black persons reported fair or poor health than non-Hispanic White persons. A higher percentage of widowed, separated, and divorced persons reported fair or poor health, compared with married persons. The percentage of adults with less than a high school education who reported fair or poor health was higher than that of adults with more education. The percentage of low-income adults who reported fair or poor health was significantly higher than adults with higher annual household incomes. Persons who were retired, unemployed, and unable to work more often reported fair or poor health than adults who were employed. Adults without health insurance more often reported fair or poor health than adults with health insurance. Compared with persons without any chronic medical conditions, persons with such conditions more often reported fair or poor health. Because the BRFSS is a cross-sectional survey, the characteristics studied were assessed at a single point in time. Thus, in some cases, it is not possible to determine whether the characteristic preceded or followed an individual's report of fair or poor health.3

Fair or poor health in Utah

The age-adjusted combined state percentage of adults reporting fair or poor health from 2001 to 2005 was 12.7%. This was substantially lower than the comparable rate of 15.9% for the U.S. adult population as a whole. Using the crude Utah rate of 11.5% and the midpoint population in 2003, this translates into approximately 190,000 Utah adults with self-rated fair or poor health in 2003. The age-adjusted prevalence of fair or

Utah Objective: No objective listed. **HP2010 Goal:** Overarching – Improve the quality and years of healthy life and eliminate health disparities

Utah Behavioral Risk Factor Surveillance System Local Health District Report 2001-2005, Utah Department of Health

This text box contains Utah Department of Health and Healthy People 2010 objectives that relate to the BRFSS measure. If the objective utilizes age-adjusted data, that is also indicated in this text box.

1 FAIR OR POOR HEALTH

Fair or poor health in Utah (continued)

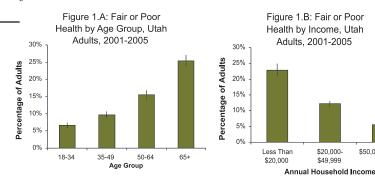
poor health varied by local health district ranging from a low of 9.3% in Summit County to a high of 17.4% in Central Utah. Three local health districts, Central Utah, Southeastern Utah, and TriCounty, had age-adjusted rates higher than the state. Davis County and Summit County had rates lower than the state rate. The remaining seven local health districts had rates similar to the state rate.

The age-adjusted rate of fair or poor health varied greatly amongst Utah's small areas from a low of 4.2% in Pleasant Grove/Lindon to a high of 34.0% in Glendale. There was substantial variation in this measure amongst small areas within some local health districts. For example, the age-adjusted rates varied in Davis County health district from a low of 4.8% in Farmington/Centerville to a high of 12.9% in Clearfield/Hill AFB. These rates were statistically significantly different. Please refer to the accompanying bar graph, table, and maps for more information about small areas and self-rated health. The shading on the maps indicate which small areas differed substantially from the state rate.

The Utah data also show that the percentage of people reporting fair or poor health increased with increasing age and decreased with increasing income as illustrated in the graphs below. This means that health districts and small areas with a higher percentage of people in older age groups or lower income categories would most likely have a greater percentage of adults with fair or poor health. Age-adjusted rates control for population age differences.

Graphs that are included on this page for most of the measures display the data in a variety of ways.

This text provides information about prevention and resources available.

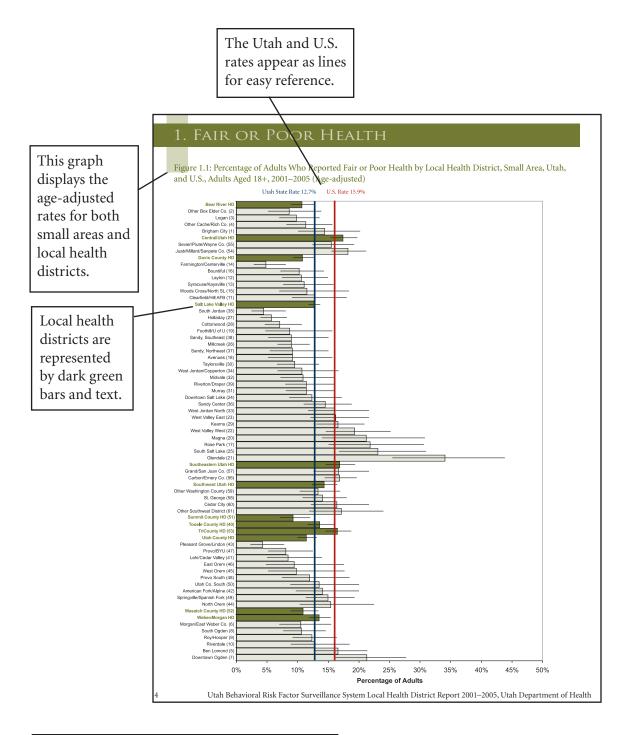


Prevention/Resources

The Utah Department of Health works collaboratively with Utah's local health districts and other public and private organizations through many programs in order to prevent avoidable illness, injury, disability, and premature death; assure access to affordable, quality health care; and to promote healthy lifestyles. Many of the specific programs are discussed in the context of other BRFSS measures included in this report, such as the current smoking and diabetes measures.

\$50,000 or Over

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The graph is first arranged alphabetically by local health district, then in ascending order of the percentages of the measures by small area within each health district.

The first column provides the state ranking for each small area.

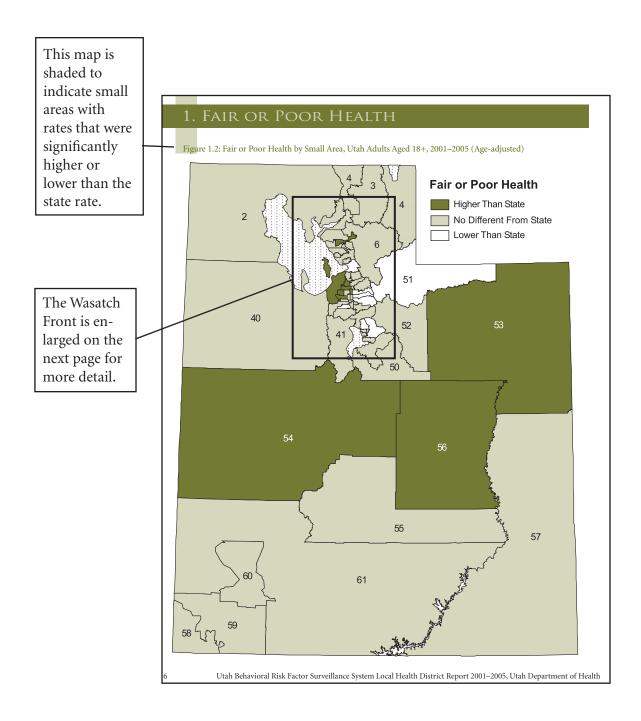
Crude rates should be used to gauge the true magnitude of the event in the community.

Age-adjusted rates should be used to compare across small areas and to the state and U.S. rates.

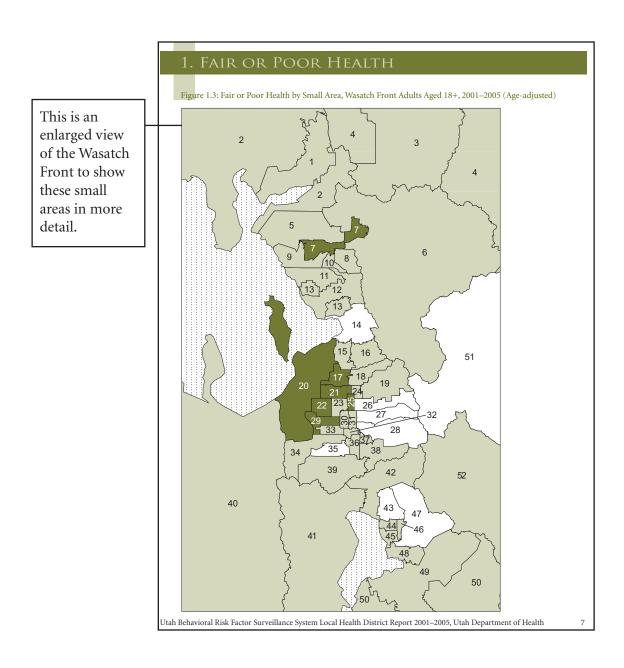
This table contains the age-adjusted data used to create the maps and bar chart, as well as the crude rates for each small area, local health district, the state, and the U.S. It also includes the total number of adults in the relevant population, and the estimated number of those adults with the measure based on the 2003 population.

	Table 4: Fair as Dana Handle Handle Handle						
	Table 1: Fair or Poor F	lealth by Health District, Small Ar Number of Adults		Area Utah	n, and U.S., 2001-2005 95% Confidence Interv		
1	State, Health District, or Small	2003 Population	Reporting Fair or Poor	'	Age-adjusted	95 % Connde	nce mierv
State Rank*	Area	18+	Health	Crude Rate	Rate	Lower	Upper
	U.S.	217,803,051	34,804,928	16.0%	15.9%	15.8%	16
	State of Utah Bear River HD	1,657,454 98,027	190,441 9,126	11.5% 9.3%	12.7% 10.7%	12.2% 8.9%	13 12
41	Brigham City (1)	14,566	2,068	14.2%	14.4%	10.0%	20
	Logan (3)	45,904	3,314	7.2%	9.8%	6.9%	13
8	Other Box Elder Co. (2)	14,636	1,262	8.6%	8.6%	5.2%	13
27		22,921	2,356	10.3%	11.4%	8.1%	15
55	Central Utah HD	47,558	8,151	17.1%	17.4%	15.3%	19
45		31,637 15,921	5,682 2.496	18.0% 15.7%	18.2% 15.5%	15.5% 12.4%	21 19
43	Davis County HD	175,027	16,383	9.4%	10.8%	9.2%	12
19	Bountiful (16)	33,318	3,169	9.5%	10.2%	7.2%	14
34	Clearfield/Hill AFB (11)	37,329	4,177	11.2%	12.9%	9.1%	18
	Farmington/Centerville (14)	19,034	683	3.6%	4.8%	2.8%	8
21	Layton (12)	46,815	4,850	10.4%	10.6%	7.4%	15
26	Syracuse/Kaysville (13) Woods Cross/North SL (15)	24,542 13,989	2,123 1,437	8.7% 10.3%	11.1% 11.5%	7.6% 6.9%	15 18
30	Salt Lake Valley HD	658,810	76,817	11.7%	12.7%	11.8%	13
13		18,959	1,759	9.3%	9.2%	5.2%	15
5	Cottonwood (28)	33,297	2,471	7.4%	7.1%	4.7%	10
	Downtown Salt Lake (24)	42,808	4,302	10.1%	12.3%	8.6%	17
9		17,778 18,642	1,687 6,236	9.5% 33.5%	8.7% 34.0%	4.7% 25.4%	15 43
4	Holladay (27)	35,956	2,679	7.5%	5.7%	3.9%	43 8
51		42,995	5,220	12.1%	16.6%	13.0%	20
57		15,623	2,445	15.7%	21.2%	14.0%	30
	Midvale (32)	21,672	2,052	9.5%	10.8%	7.2%	16
11	Millcreek (26)	44,008	4,471	10.2%	9.0%	6.7%	11
29	Murray (31)	24,072	2,930	12.2%	11.4%	8.1%	16
28	Riverton/Draper (39) Rose Park (17)	41,391 22,639	3,228 4,732	7.8% 20.9%	11.4% 21.8%	8.0% 15.0%	16 30
42	Sandy Center (36)	36,106	4,127	11.4%	14.5%	11.0%	18
	Sandy, Northeast (37)	18,245	1,569	8.6%	9.1%	5.4%	15
	Sandy, Southeast (38)	20,781	1,390	6.7%	9.0%	5.2%	15
2		20,931	873	4.2%	4.4%	2.4%	8
60		18,456	4,010	21.7%	23.1%	16.7%	31
16	Taylorsville (30) West Jordan North (33)	27,372 30,391	2,570 3,659	9.4% 12.0%	9.5% 16.1%	6.6% 11.7%	13 21
	West Jordan/Copperton (34)	26,360	2,278	8.6%	10.7%	6.7%	16
47	West Valley East (23)	35,527	5,446	15.3%	16.3%	12.0%	21
56	West Valley West (22)	44,794	8,417	18.8%	19.3%	14.5%	25
	Southeastern Utah HD	36,828	6,246	17.0%	16.9%	14.7%	19
53 52	Carbon/Emery Co. (56)	21,451 15.377	3,690 2,537	17.2% 16.5%	16.9% 16.6%	14.4% 12.6%	19 21
52	Grand/San Juan Co. (57) Southwest Utah HD	15,377	2,537 16,888	16.5%	16.6%	12.6%	16
48	Cedar City (60)	22.401	2.845	12.7%	14.3%	12.3%	21
	Other Southwest District (61)	15,384	2,712	17.6%	17.1%	11.9%	24
36	Other Washington County (59)	32,503	4,469	13.8%	13.3%	10.4%	16
39	St. George (58)	45,862	6,595	14.4%	14.0%	10.8%	18
14		24,525	1,950	8.0%	9.3%	7.1%	12
	Tooele County HD (40) TriCounty HD (53)	32,458 28,023	3,824 4,444	11.8% 15.9%	13.6% 16.5%	11.6% 14.5%	15 18
49	Utah County HD	278,832	25.987	9.3%	11.5%	10.0%	13
40		26,819	3,374	12.6%	14.1%	9.7%	20
	East Orem (46)	14,955	989	6.6%	9.4%	4.8%	17
7	Lehi/Cedar Valley (41)	18,752	1,172	6.3%	8.5%	5.0%	13
	North Orem (44)	25,965	3,575	13.8%	15.4%	10.3%	22
1	Pleasant Grove/Lindon (43) Provo/BYU (47)	24,636 39.401	983 2.691	4.0% 6.8%	4.2% 8.1%	2.3% 5.1%	7 12
	Provo/BYU (47) Provo South (48)	39,401 48,138	2,003	4.2%	8.1% 11.9%	7.5%	12
43		41,036	5,195	12.7%	14.9%	11.4%	19
37	Utah Co. South (50)	17,363	2,158	12.4%	13.5%	8.8%	20
	West Orem (45)	21,774	2,450	11.3%	9.8%	5.2%	17
25	Wasatch County HD (52)	12,514	1,295	10.4%	10.9%	8.8%	13
50	Weber-Morgan HD	148,702	18,989	12.8% 14.2%	13.6%	11.9%	15
50	Ben Lomond (5) Downtown Ogden (7)	33,215 21,684	4,713 4,038	14.2% 18.6%	16.5% 21.3%	12.6% 16.0%	21 27
20		24,131	2,314	9.6%	10.5%	7.0%	15
35		15,522	2,091	13.5%	12.9%	8.8%	18
33	Roy/Hooper (9)	27,898	2,885	10.3%	12.3%	9.2%	16
22	South Ogden (8) by 61 small areas for AA Rate; 1 is a	26,255	2,967	11.3%	10.6%	7.6%	14

The table is arranged alphabetically by local health district then alphabetically by small area within each health district.



The numbers on the map are small area labels. For a complete list of small area labels, names, and boundary definitions, please refer to *Appendix C: Small Area Definition and Key Maps*, starting on page 145.



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